

<i>SERFF Tracking Number:</i>	<i>MULF-126253992</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>John Hancock Life Insurance Company (USA)</i>	<i>State Tracking Number:</i>	<i>43128</i>
<i>Company Tracking Number:</i>	<i>2009 JHUSA MERGER</i>		
<i>TOI:</i>	<i>LTC06 Long Term Care - Other</i>	<i>Sub-TOI:</i>	<i>LTC06.000 Long Term Care - Other</i>
<i>Product Name:</i>	<i>2009 JHUSA Merger</i>		
<i>Project Name/Number:</i>	<i>2009 JHUSA Merger/</i>		

## Filing at a Glance

Company: John Hancock Life Insurance Company (USA)

Product Name: 2009 JHUSA Merger

SERFF Tr Num: MULF-126253992 State: Arkansas

TOI: LTC06 Long Term Care - Other

SERFF Status: Closed-Approved State Tr Num: 43128

Sub-TOI: LTC06.000 Long Term Care - Other

Co Tr Num: 2009 JHUSA MERGER State Status: Closed

Filing Type: Form

Reviewer(s): Harris Shearer

Author: Glenn Daly

Disposition Date: 08/17/2009

Date Submitted: 08/05/2009

Disposition Status: Approved

Implementation Date Requested: 12/31/2009

Implementation Date:

State Filing Description:

## General Information

Project Name: 2009 JHUSA Merger

Status of Filing in Domicile: Pending

Project Number:

Date Approved in Domicile:

Requested Filing Mode: Review & Approval

Domicile Status Comments: Michigan exempts forms from review and approval.

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Group Market Size:

Overall Rate Impact:

Group Market Type:

Filing Status Changed: 08/17/2009

Explanation for Other Group Market Type:

State Status Changed: 08/17/2009

Deemer Date:

Created By: Glenn Daly

Submitted By: Glenn Daly

Corresponding Filing Tracking Number:

Filing Description:

Re: John Hancock Life Insurance Company (U.S.A.)

NAIC #: 65838 FEIN: 01-0233346

Company Merger of John Hancock Life Insurance Company (NAIC # 65099)

and John Hancock Variable Life Insurance Company (NAIC # 90204)

into John Hancock Life Insurance Company (U.S.A.)

Forms: EndJHL2009 Merger Endorsement

(for John Hancock Life Insurance Company)

SERFF Tracking Number: MULF-126253992 State: Arkansas  
Filing Company: John Hancock Life Insurance Company (USA) State Tracking Number: 43128  
Company Tracking Number: 2009 JHUSA MERGER  
TOI: LTC06 Long Term Care - Other Sub-TOI: LTC06.000 Long Term Care - Other  
Product Name: 2009 JHUSA Merger  
Project Name/Number: 2009 JHUSA Merger/

EndJHV2009 Merger Endorsement  
(for John Hancock Variable Life Insurance Company)

Dear Commissioner:

We enclose copies of the forms listed above for your review and approval. These forms are new and will replace any prior versions that we currently have on file with your Department.

The forms reflect John Hancock's intention to merge John Hancock Life Insurance Company and John Hancock Variable Life Insurance Company into an existing company, John Hancock Life Insurance Company (U.S.A.). The planned effective date of our merger will be December 31, 2009, subject to regulatory approval.

Merger Endorsements

Endorsement forms EndJHL2009 and EndJHV2009 are being filed for your review and approval, and after the merger, will be mailed to existing policyholders of John Hancock Life Insurance Company and John Hancock Variable Life Insurance Company, respectively.

Pursuant to the merger, John Hancock Life Insurance Company (U.S.A.) is assuming all obligations and liabilities for John Hancock Life Insurance Company and John Hancock Variable Life Insurance Company.

John Hancock Life Insurance Company and John Hancock Variable Life Insurance Company will cease to write insurance in your state.

New Business

Our understanding is that your Department requires a certified list of previously-approved, currently-marketed forms that will continue to be offered by the surviving company.

We have listed such forms for each of the affected product lines, indicating a form number, description, prior approval date and your file tracking number (if applicable). This is limited to Individual Long-Term Care Insurance, Fixed Products, and Group Health policies.

Please note that our Life Insurance and Variable Annuity lines of business already market approved products filed under John Hancock Life Insurance Company (U.S.A.), and no longer market products filed under John Hancock Life Insurance Company and John Hancock Variable Life Insurance Company.

The only change being made to previously-approved forms is the company name. We certify that no other changes

SERFF Tracking Number: MULF-126253992 State: Arkansas  
Filing Company: John Hancock Life Insurance Company (USA) State Tracking Number: 43128  
Company Tracking Number: 2009 JHUSA MERGER  
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Product Name: 2009 JHUSA Merger  
Project Name/Number: 2009 JHUSA Merger/

have been made and form numbers will not change.

In the event that your Department approves any currently-pending submissions after the date of this filing, this certified list is considered amended to include reference to all such approved forms.

For new form filings occurring after the date of this merger submission but prior to the actual merger date, the company will make reference to the merger and name change in the cover letter to such filings so as not to have to resubmit lists repeatedly to your Department.

This submission is being filed simultaneously in all 50 states and the District of Columbia. Our domiciliary state of Michigan exempts these forms from review and approval.

A separate merger filing is being submitted shortly to your Corporate Licensing division.

The following items are included:

- this cover letter
- a name-change endorsement for applicable in-force contracts
- a list of previously-approved, currently-marketed forms
- all required certifications
- \$40.00 filing fee

Should you have any questions about this filing, please do not hesitate to contact me. Otherwise, we look forward to your earliest possible indication of approval.

## Company and Contact

### Filing Contact Information

Glenn Daly, Sr. Contact Consultant gdaly@jhancock.com  
200 Berkeley Street 888-877-6075 [Phone] 1 [Ext]  
B-6-6 617-572-0399 [FAX]  
Boston, MA 02117

### Filing Company Information

John Hancock Life Insurance Company (USA) CoCode: 65838 State of Domicile: Michigan  
200 Berkeley Street Group Code: Company Type:  
Boston, MA 02176 Group Name: State ID Number:  
(617) 572-6000 ext. [Phone] FEIN Number: 01-0233346

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SERFF Tracking Number: MULF-126253992 State: Arkansas  
Filing Company: John Hancock Life Insurance Company (USA) State Tracking Number: 43128  
Company Tracking Number: 2009 JHUSA MERGER  
TOI: LTC06 Long Term Care - Other Sub-TOI: LTC06.000 Long Term Care - Other  
Product Name: 2009 JHUSA Merger  
Project Name/Number: 2009 JHUSA Merger/

## Filing Fees

Fee Required? Yes  
Fee Amount: \$40.00  
Retaliatory? No  
Fee Explanation: 2 endorsements x \$20.00 = \$40.00  
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
John Hancock Life Insurance Company (USA)	\$40.00	08/05/2009	29640685

<i>SERFF Tracking Number:</i>	<i>MULF-126253992</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>John Hancock Life Insurance Company (USA)</i>	<i>State Tracking Number:</i>	<i>43128</i>
<i>Company Tracking Number:</i>	<i>2009 JHUSA MERGER</i>		
<i>TOI:</i>	<i>LTC06 Long Term Care - Other</i>	<i>Sub-TOI:</i>	<i>LTC06.000 Long Term Care - Other</i>
<i>Product Name:</i>	<i>2009 JHUSA Merger</i>		
<i>Project Name/Number:</i>	<i>2009 JHUSA Merger/</i>		

## Correspondence Summary

### Dispositions

<b>Status</b>	<b>Created By</b>	<b>Created On</b>	<b>Date Submitted</b>
Approved	Harris Shearer	08/17/2009	08/17/2009

<i>SERFF Tracking Number:</i>	<i>MULF-126253992</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>John Hancock Life Insurance Company (USA)</i>	<i>State Tracking Number:</i>	<i>43128</i>
<i>Company Tracking Number:</i>	<i>2009 JHUSA MERGER</i>		
<i>TOI:</i>	<i>LTC06 Long Term Care - Other</i>	<i>Sub-TOI:</i>	<i>LTC06.000 Long Term Care - Other</i>
<i>Product Name:</i>	<i>2009 JHUSA Merger</i>		
<i>Project Name/Number:</i>	<i>2009 JHUSA Merger/</i>		

## **Disposition**

Disposition Date: 08/17/2009

Implementation Date:

Status: Approved

Comment: APPROVED SUBJECT TO MERGER FILING WITH OUR CORPORATE LICENSING DIVISION.

Rate data does NOT apply to filing.

SERFF Tracking Number:	MULF-126253992	State:	Arkansas
Filing Company:	John Hancock Life Insurance Company (USA)	State Tracking Number:	43128
Company Tracking Number:	2009 JHUSA MERGER		
TOI:	LTC06 Long Term Care - Other	Sub-TOI:	LTC06.000 Long Term Care - Other
Product Name:	2009 JHUSA Merger		
Project Name/Number:	2009 JHUSA Merger/		

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		Yes
Supporting Document	Health - Actuarial Justification		Yes
Supporting Document	Outline of Coverage		Yes
Supporting Document	Filing Cover Letter		Yes
Supporting Document	Certified List - Individual Long-Term Care Insurance Forms		Yes
Supporting Document	Certified List - Fixed Products		Yes
Supporting Document	Certified List - Group Health		Yes
Form	Merger Endorsement		Yes
Form	Merger Endorsement		Yes

SERFF Tracking Number: MULF-126253992 State: Arkansas

Filing Company: John Hancock Life Insurance Company (USA) State Tracking Number: 43128

Company Tracking Number: 2009 JHUSA MERGER

TOI: LTC06 Long Term Care - Other Sub-TOI: LTC06.000 Long Term Care - Other

Product Name: 2009 JHUSA Merger

Project Name/Number: 2009 JHUSA Merger/

## Form Schedule

Lead Form Number: EndJHL2009

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	EndJHL2009	Certificate Amendment, Insert Page, Endorsement or Rider	Merger Endorsement Initial			40.000	Endorsement _JHLICO_2009.pdf
	EndJHVV2009	Certificate Amendment, Insert Page, Endorsement or Rider	Merger Endorsement Initial			40.000	Endorsement _JHVLICO 2009.pdf



**John Hancock Life Insurance Company (U.S.A.)  
601 Congress Street, Boston, MA 02210**

**ENDORSEMENT**

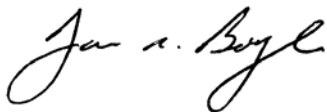
As a result of the merger of John Hancock Life Insurance Company into John Hancock Life Insurance Company (U.S.A.), this Endorsement attaches to and forms part of Your Contract, Policy or Certificate, and amends it as follows:

- All references to the name John Hancock Life Insurance Company are changed to John Hancock Life Insurance Company (U.S.A.).
- Any references to Boston, Massachusetts as the statutory home office are changed to Bloomfield Hills, Michigan. The headquarters, however, remains in Boston, Massachusetts, and other administrative or service offices are also not changed.
- All the terms, provisions and conditions of Your Contract, Policy or Certificate remain unchanged except as described in this endorsement.
- The address to send premium payments, obtain claims forms, and file claims remains unchanged.

Signed for the Company on [December 31, 2009]:

JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)

By:



PRESIDENT



SECRETARY

**John Hancock Life Insurance Company (U.S.A.)  
601 Congress Street, Boston, MA 02210**

**ENDORSEMENT**

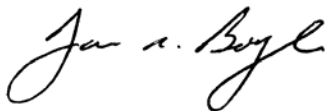
As a result of the merger of John Hancock Variable Life Insurance Company into John Hancock Life Insurance Company (U.S.A.), this Endorsement attaches to and forms part of Your Contract, Policy or Certificate, and amends it as follows:

- All references to the name John Hancock Variable Life Insurance Company are changed to John Hancock Life Insurance Company (U.S.A.).
- Any references to Boston, Massachusetts as the statutory office are changed to Bloomfield Hills, Michigan. The headquarters, however, remains in Boston, Massachusetts, and other administrative or service offices are also not changed.
- All the terms, provisions and conditions of Your Contract, Policy or Certificate remain unchanged except as described in this endorsement.
- The address to send premium payments, obtain claims forms, and file claims remains unchanged.

Signed for the Company on [December 31, 2009]:

JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)

By:



PRESIDENT



SECRETARY

SERFF Tracking Number: MULF-126253992 State: Arkansas  
Filing Company: John Hancock Life Insurance Company (USA) State Tracking Number: 43128  
Company Tracking Number: 2009 JHUSA MERGER  
TOI: LTC06 Long Term Care - Other Sub-TOI: LTC06.000 Long Term Care - Other  
Product Name: 2009 JHUSA Merger  
Project Name/Number: 2009 JHUSA Merger/

## Supporting Document Schedules

	Item Status:	Status Date:
<b>Satisfied - Item:</b> Flesch Certification <b>Comments:</b> <b>Attachment:</b> Flesch_Certification_AR.pdf		

	Item Status:	Status Date:
<b>Bypassed - Item:</b> Application <b>Bypass Reason:</b> Not applicable. Merger filing - list of currently-marketed forms to be used by the surviving company post merger is included. <b>Comments:</b>		

	Item Status:	Status Date:
<b>Bypassed - Item:</b> Health - Actuarial Justification <b>Bypass Reason:</b> Not applicable. Merger filing - list of currently-marketed forms to be used by the surviving company post merger is included. No change in rates or actuarial assumptions. <b>Comments:</b>		

	Item Status:	Status Date:
<b>Bypassed - Item:</b> Outline of Coverage <b>Bypass Reason:</b> Not applicable. Merger filing - list of currently-marketed forms to be used by the surviving company post merger is included. <b>Comments:</b>		

	Item Status:	Status Date:
<b>Satisfied - Item:</b> Filing Cover Letter <b>Comments:</b>		

SERFF Tracking Number: MULF-126253992 State: Arkansas  
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Company Tracking Number: 2009 JHUSA MERGER  
TOI: LTC06 Long Term Care - Other Sub-TOI: LTC06.000 Long Term Care - Other  
Product Name: 2009 JHUSA Merger  
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**Attachment:**

2009\_JHUSA\_List\_Filing\_CoverLetter\_AR.pdf

**Item Status:**

**Status**

**Date:**

**Satisfied - Item:** Certified List - Individual Long-Term  
Care Insurance Forms

**Comments:**

**Attachment:**

LTC\_Certified\_List\_2009\_AR.pdf

**Item Status:**

**Status**

**Date:**

**Satisfied - Item:** Certified List - Fixed Products

**Comments:**

**Attachment:**

Fixed\_Products\_Certified List\_2009\_AR.pdf

**Item Status:**

**Status**

**Date:**

**Satisfied - Item:** Certified List - Group Health

**Comments:**

**Attachment:**

Group\_Health\_Certified List\_2009\_AR.pdf

## *FLESCH SCORE CERTIFICATION*

The undersigned, as an officer of the John Hancock Life Insurance Company (U.S.A), hereby certifies that each form in this filing meets the Flesch minimum reading ease score of 40.

A handwritten signature in black ink, appearing to read "Mark P. Rob". The signature is fluid and cursive, with the first name "Mark" and last name "Rob" being clearly legible, and "P." as a middle initial.

---

(Signed by Officer of Company)

Date: 8/5/09

John Hancock Life Insurance Company (U.S.A.)  
200 Berkeley Street, B-6-06  
Boston, Massachusetts 02117

Phone: 1-888-877-6075 (toll-free)  
Direct (617) 572-4512  
Fax: (617) 572-0399

e-mail: gdaly@jhancock.com



**Glenn Daly**  
Director

August 5, 2009

Commissioner Jay Bradford  
Arkansas Department of Insurance  
1200 West 3rd Street  
Little Rock, AR 72201-1904

**Re: John Hancock Life Insurance Company (U.S.A.)  
NAIC #: 65838 FEIN: 01-0233346**

**Company Merger of John Hancock Life Insurance Company (NAIC # 65099)  
and John Hancock Variable Life Insurance Company (NAIC # 90204)  
into John Hancock Life Insurance Company (U.S.A.)**

**Forms: EndJHL2009 Merger Endorsement  
(for John Hancock Life Insurance Company)**

**EndJHV2009 Merger Endorsement  
(for John Hancock Variable Life Insurance Company)**

Dear Commissioner:

We enclose copies of the forms listed above for your review and approval. These forms are new and will replace any prior versions that we currently have on file with your Department.

The forms reflect John Hancock's intention to merge John Hancock Life Insurance Company and John Hancock Variable Life Insurance Company into an existing company, John Hancock Life Insurance Company (U.S.A.). The planned effective date of our merger will be December 31, 2009, subject to regulatory approval.

**Merger Endorsements**

Endorsement forms **EndJHL2009** and **EndJHV2009** are being filed for your review and approval, and after the merger, will be mailed to existing policyholders of John Hancock Life Insurance Company and John Hancock Variable Life Insurance Company, respectively.

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John Hancock Life Insurance Company and John Hancock Variable Life Insurance Company will cease to write insurance in your state.

## New Business

Our understanding is that your Department requires a certified list of previously-approved, currently-marketed forms that will continue to be offered by the surviving company.

We have listed such forms for each of the affected product lines, indicating a form number, description, prior approval date and your file tracking number (if applicable). This is limited to **Individual Long-Term Care Insurance, Fixed Products, and Group Health** policies.

Please note that our **Life Insurance** and **Variable Annuity** lines of business already market approved products filed under John Hancock Life Insurance Company (U.S.A.), and no longer market products filed under John Hancock Life Insurance Company and John Hancock Variable Life Insurance Company.

The only change being made to previously-approved forms is the company name. We certify that no other changes have been made and form numbers will not change.

In the event that your Department approves any currently-pending submissions after the date of this filing, this certified list is considered amended to include reference to all such approved forms.

For new form filings occurring after the date of this merger submission but prior to the actual merger date, the company will make reference to the merger and name change in the cover letter to such filings so as not to have to resubmit lists repeatedly to your Department.

This submission is being filed simultaneously in all 50 states and the District of Columbia. Our domiciliary state of Michigan exempts these forms from review and approval.

A separate merger filing is being submitted shortly to your Corporate Licensing division.

The following items are included:

- this cover letter
- a name-change endorsement for applicable in-force contracts
- a list of previously-approved, currently-marketed forms
- all required certifications
- \$40.00 filing fee

Should you have any questions about this filing, please do not hesitate to contact me. Otherwise, we look forward to your earliest possible indication of approval.

Sincerely,

A handwritten signature in cursive script that reads "Glenn Daly". The signature is written in dark ink and is positioned above the printed name and title.

Glenn Daly  
Director

## *FLESCH SCORE CERTIFICATION*

The undersigned, as an officer of the John Hancock Life Insurance Company (U.S.A), hereby certifies that each form in this filing meets the Flesch minimum reading ease score of 40.

A handwritten signature in black ink, appearing to read "Mark P. Rob". The signature is fluid and cursive, with the first name "Mark" being more prominent.

---

(Signed by Officer of Company)

Date: 8/5/09



ARKANSAS  
John Hancock Life Insurance Company (U.S.A.)  
Individual Long-Term Care Insurance Forms List

FORM NUMBER	DESCRIPTION	APPROVAL DATE	DEPT. FILE #
<b>LTC-06 AR</b>	<b>Policy Form - Leading Edge</b>	01/08/2007	N/A
LTC-CPP2 1/08	Additional Consumer Protection Provisions	08/21/2008	MULF-125419947
LTC-CPI/GIO 6/07	Automatic Inflation Coverage	12/03/2007	35146
LTC-CGP 6/06	5% Compound Guaranteed Purchase Inflation Coverage	01/08/2007	N/A
LTC-SHC 6/06	SharedCare Rider	01/08/2007	N/A
LTC-ZDE 6/06	Zero Day Elimination Period for Home Health Care and Adult Day Care Rider	01/08/2007	N/A
LTC-EXT 6/06	\$1 Million Rider	01/08/2007	N/A
LTC-NONFD 9/03	Nonforfeiture (if daily benefit is selected)	10/16/2003	N/A
LTC-NONFM 9/03	Nonforfeiture (if monthly benefit is selected)	10/16/2003	N/A
LTC-CNFD	Contingent Nonforfeiture (if daily benefit is selected)	03/29/2002	N/A
LTC-CNFM	Contingent Nonforfeiture (if daily benefit is selected)	03/29/2002	N/A
LTCAPP07-2 AR	Application	12/03/2007	35146
LTCCR06	Advance Payment Receipt	01/08/2007	N/A
LTCMED-06	HIPAA Medical Authorization	01/08/2007	N/A
REI-APP AR	Reinstatement Application	03/29/2002	N/A
OCLTC-07-2 1/08	Outline of Coverage	08/21/2008	MULF-125419947
LTC-PWK 6/06	Suitability Worksheet (agent)	01/08/2007	N/A
LTC-PWKDM 6/06	Suitability Worksheet (direct)	01/08/2007	N/A
15-LTC-06	Replacement (agent)	01/08/2007	N/A
15-LTC-06DM	Replacement (direct)	01/08/2007	N/A
LTC-SUIT 6/06	Suitability Information Sheet	01/08/2007	N/A
LTC-RII 6/06	Rate Increase Disclosure	01/08/2007	N/A
LTC-96-MED 9/96	Federal Medicare Notice	12/18/1996	N/A
LTC-CV-AR 3/97	Policyholder Notice	05/20/1997	N/A
LTC-CCE 9/03	Administrative Change Form	10/16/2003	N/A
<b>LTC-03 AR</b>	<b>Policy Form - Custom Care II Enhanced</b>	10/16/2003	N/A
LTC-CPP1 1/08	Additional Consumer Protection Provisions	08/21/2008	MULF-125419947
LTC-2CPI/GIO 1/08	CPI Compound Inflation	08/21/2008	MULF-125419947
LTC-COMP	5% Compound Inflation	03/29/2002	N/A
LTC-SIMP	Simple Inflation	03/29/2002	N/A
LTC-GPO 1/08	GPO Inflation	08/21/2008	MULF-125419947
LTC-SHC	SharedCare	03/29/2002	N/A
LTC-FCB	FamilyCare	03/29/2002	N/A
LTC-ROB 9/03	Restoration of Benefits	10/16/2003	N/A
LTC-SURV	Survivor Waiver	03/29/2002	N/A
LTC-ROPR 9/03	Enhanced Return of Premium at Death Benefit	10/16/2003	N/A
LTC-WEP	Waiver of the Home Health Care Elimination Period	03/29/2002	N/A

In the event any pending forms submission after the date of this filing is approved, this certified list is amended to include all such forms.

ARKANSAS  
John Hancock Life Insurance Company (U.S.A.)  
Individual Long-Term Care Insurance Forms List

LTC-ACB 9/03 AR	Additional Cash Benefit	10/16/2003	N/A
LTC-DAB 9/03	Double Coverage for Accident Benefit	10/16/2003	N/A
LTC-LIMCNF 9/07	Contingent Nonforfeiture (for Limited Pay Options)	08/21/2008	MULF-125419947
CC2APP08 AR	Application	08/21/2008	MULF-125419947
CC2APPUSAA08 AR	Application	08/21/2008	MULF-125419947
CC2MGTI08 AR	Application	08/21/2008	MULF-125419947
CC2SGRP08 AR	Application	08/21/2008	MULF-125419947
LTCMED-03	Medical Authorization Form	10/16/2003	N/A
LTCCR-03	Advance Payment Receipt	10/16/2003	N/A
FCSUPP-03 AR	FamilyCare Addendum	10/16/2003	N/A
OCLTC-03 1/08	Outline of Coverage	08/21/2008	MULF-125419947
LTC-PWK 1/08	Suitability Worksheet (agent)	08/21/2008	MULF-125419947
LTC-PWKDM 1/08	Suitability Worksheet (direct)	08/21/2008	MULF-125419947
15-LTC-03	Replacement (agent)	10/16/2003	N/A
15-LTC-03DM	Replacement (direct)	10/16/2003	N/A
LTC-SUIT 9/07	Suitability Information Sheet	08/21/2008	MULF-125419947
LTC-RII 9/07	Potential Rate Increase Disclosure	08/21/2008	MULF-125419947
LTC-PRT AR 10/07	Partnership Notice	07/08/2008	39306
LTC-NPRT AR 10/07	Partnership Notice	07/08/2008	39306
LTC-OC-PRT AR10/07	Partnership Disclosure	07/08/2008	39306
LTC-PRT/UPG AR 6/08	Partnership Endorsement	07/08/2008	39306
LTC-NEA 1/09	Endorsement	03/06/2009	41315
LTC-EEP 2/09	Enhanced Elimination Period En	03/12/2009	MULF-126047669
CORP-CPI/GIO 2/09	CPI Compound Inflation Coverage & Guaranteed Increase Option	03/12/2009	MULF-126047669
LTCAPP09-2 AR	Application	03/12/2009	MULF-126047669
CORPAPP09-2 AR	Corporate Solutions Application	03/12/2009	MULF-126047669
OCLTC-07-2 AR 2/09	Corporate Solutions Outline of Coverage	03/12/2009	MULF-126047669
CORPAPP07-2 AR	Corporate Solutions Application	12/03/2007	35146

In the event any pending forms submission after the date of this filing is approved, this certified list is amended to include all such forms.

**ARKANSAS  
Annuity Contracts**

<b>MASTER GROUP CONTRACT FORM NUMBER</b>	<b>DESCRIPTION</b>	<b>DEPT FILE NO.</b>	<b>APPROVAL DATE</b>
01GPAMFLEX	Master Group Contract		02/12/2002

<b>MASTER GROUP APPLICATION FORM NUMBER</b>	<b>DESCRIPTION</b>	<b>DEPT FILE NO.</b>	<b>APPROVAL DATE</b>
156-GPAMFLEX-01	Application for Master Group Contract		02/12/2002

<b>GROUP FIXED DEFERRED ANNUITY CERTIFICATE FORM NUMBER</b>	<b>DESCRIPTION</b>	<b>DEPT FILE NO.</b>	<b>APPROVAL DATE</b>
03GPAGRP	Flexible Premium Certificate		08/25/2003

<b>GROUP FIXED DEFERRED ANNUITY SPEC PAGE FORM NUMBER</b>	<b>DESCRIPTION</b>	<b>DEPT FILE NO.</b>	<b>APPROVAL DATE</b>
GPAGRP-IP2A	Specification Page for Flexible Group Certificate		12/18/2002

<b>GROUP FIXED DEFERRED ANNUITY APPLICATION FORM NUMBER</b>	<b>DESCRIPTION</b>	<b>DEPT FILE NO.</b>	<b>APPROVAL DATE</b>
156-GPAGRP-04	Application for Flexible Group Certificate		08/16/2004
156-GPAGPNCP-04	Application for Flexible Group Certificate		08/16/2004

<b>FIXED DEFERRED ANNUITY CONTRACT FORM NUMBER</b>	<b>DESCRIPTION</b>	<b>DEPT FILE NO.</b>	<b>APPROVAL DATE</b>
03GPA	Flexible Premium Contract		10/06/2003
06GPA ed BA	Flexible Premium Contract	35648	04/16/2007
08PEGPA	Flexible Premium Contract	39327	06/23/2008
08PEGPA ed. BA	Flexible Premium Contract	40839	11/18/2008

<b>FIXED DEFERRED ANNUITY SPEC PAGE FORM NUMBER</b>	<b>DESCRIPTION</b>	<b>DEPT FILE NO.</b>	<b>APPROVAL DATE</b>
SPEC-IP2A	Specifications Page for Flexible Premium Contract		10/06/2003
SPEC-PE08	Specifications Page for Flexible Premium Contract	39327	06/23/2008

<b>FIXED DEFERRED ANNUITY APPLICATION FORM NUMBER</b>	<b>DESCRIPTION</b>	<b>DEPT FILE NO.</b>	<b>APPROVAL DATE</b>
156-GPA-04	Application for Flexible Premium Contract		08/11/2004
156-GPA-04 NCSP	Application for Flexible Premium Contract		08/11/2004
156-PEGPA-08	Application for Flexible Premium Contract	39327	06/23/2008

<b>FIXED DEFERRED ANNUITY ANCILLARY FORM NUMBER</b>	<b>DESCRIPTION</b>	<b>DEPT FILE NO.</b>	<b>APPROVAL DATE</b>
03CSP	Care Solutions Plus Rider		01/05/2004
03GIRE1-3	Guaranteed Minimum Interest Rate Endorsement		07/15/2005
09GIRE1-3	Guaranteed Minimum Interest Rate Endorsement		02/05/2009
00NHCI	Nursing Home Waiver Endorsement		01/11/2001
97TSA	TSA Qualification Endorsement		02/20/1997
TSA96GM	Group Contract TSA Endorsement		08/07/2002

TSA96CM	Group Certificate TSA Endorsement		08/07/2002
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<b>FIXED IMMEDIATE ANNUITY CONTRACT FORM NUMBER</b>	<b>DESCRIPTION</b>	<b>DEPT FILE NO.</b>	<b>APPROVAL DATE</b>
07IFA	Immediate Fixed Annuity		08/08/2007
02IFA	Immediate Fixed Annuity		09/04/2002
Form 84-65	SPIA- Period Certain No Life Contingency		07/25/1985
Form 84-64	Immediate Fixed Annuity		05/22/1985
Form 78-52M	SPIA- No Refund		05/10/1984
Form 78-53M	SPIA- Refund		05/10/1984
Form 78-54M	SPIA- Installment Refund		05/10/1984
Form 78-55M	SPIA- Joint & Survivor		05/10/1984
Form 78-56M	SPIA- Guaranteed Period		05/10/1984

<b>FIXED IMMEDIATE ANNUITY APPLICATION FORM NUMBER</b>	<b>DESCRIPTION</b>	<b>DEPT FILE NO.</b>	<b>APPROVAL DATE</b>
156-IFA-07	Application for Immediate Fixed Annuity		08/08/2007
156-IFA-02	Application for Immediate Fixed Annuity		09/04/2002
156-SS-99	Application for Structured Settlement Annuity		06/25/1999
156-ANN-96	Application for SPIA Contract		04/30/1996

<b>FIXED IMMEDIATE ANNUITY ANCILLARY FORM NUMBER</b>	<b>DESCRIPTION</b>	<b>DEPT FILE NO.</b>	<b>APPROVAL DATE</b>
01NAE	Nonassignability Endorsement		04/23/2001

<b>GROUP ANNUITY CONTRACT FORM NUMBER</b>	<b>DESCRIPTION</b>	<b>DEPT FILE NO.</b>	<b>APPROVAL DATE</b>
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AR 1 NQSP-04	Non Qualified Single Premium Group Contract		07/28/2004
AR 1 SP-04	Single Premium Group Contract		07/28/2004
AR 1 NQTF-04	Non Qualified Terminal Funded Group Contract		02/15/2005
AR 1 TF-04	Terminal Funded Group Contract		02/15/2005

<b>GROUP ANNUITY APPLICATION FORM NUMBER</b>	<b>DESCRIPTION</b>	<b>DEPT FILE NO.</b>	<b>APPROVAL DATE</b>
AR 2 NQSP-04	Application for Non Qualified Single Premium Group Contract		07/28/2004
AR 2 SP-04	Application for Single Premium Group Contract		07/28/2004
AR 2 NQTF-04	Application for Non Qualified Terminal Funded Group Contract		02/15/2005
AR 2 TF-04	Application for Terminal Funded Group Contract		02/15/2005

<b>GROUP ANNUITY CERTIFICATE FORM NUMBER</b>	<b>DESCRIPTION</b>	<b>DEPT FILE NO.</b>	<b>APPROVAL DATE</b>
Form PC14NR1AD	Group Pension Deferred Retirement Life Certificate		03/10/1999
Form PC14NR6D			03/10/1999
Form PC17MCR2D			03/10/1999
Form PC17MCR6D			03/10/1999
Form PC17MCR7D			03/10/1999
Form PC17NR2D			03/10/1999
Form PC17NR3D			03/10/1999
Form PC20MCR14D			03/10/1999
Form PC20MCR17D			03/10/1999
Form PC20NR4D			03/10/1999
Form PC20NR5D			03/10/1999
Form PC30CC7D			03/10/1999

Form PC30CC8D			03/10/1999
Form PC30CC10D			03/10/1999
Form PC10NR2I	Group Pension Immediate Retired Life Certificate		03/10/1999
Form PC10NR3I			03/10/1999
Form PC10NR6I			03/10/1999
Form PC10NR7I			03/10/1999
Form PC10NR11I			03/10/1999
Form PC10NR13I			03/10/1999
Form PC10NR14I			03/10/1999
Form PC10NRT5I			03/10/1999
Form PC10NRT6I			03/10/1999
Form PC10NRT8I			03/10/1999
Form PC10NRTT1I			03/10/1999
Form PC10NRTT2I			03/10/1999
Form PC10MCR2I			03/10/1999
Form PC10MCR3I			03/10/1999
Form PC10MCR8I			03/10/1999
Form PC10MCR10I			03/10/1999
Form PC10MCRT5I			03/10/1999
Form PC10MRTT1I			03/10/1999
Form PC10MCRT1I			03/10/1999
Form PC12NR1I			03/10/1999
Form PC12NR2I			03/10/1999
Form PC12MCR2I			03/10/1999
Form PC13CAC1I			03/10/1999
Form PC14NR1I			03/10/1999
Form PC14NR5I			03/10/1999
Form PC14NRT2I			03/10/1999
Form PC14MCR1I			03/10/1999
Form PC14MCR3I			03/10/1999
Form PC14MCR5I			03/10/1999
Form PC17NR1I			03/10/1999
Form PC17MCR1I			03/10/1999
Form PC20NR2I			03/10/1999
Form PC20NR3I			03/10/1999

Form PC20MCR1I			03/10/1999
Form PC20MCR2I			03/10/1999
Form PC20MCR6I			03/10/1999
Form PC20MCRT1I			03/10/1999
Form PC20MCRT2I			03/10/1999
Form PC20MCRT3I			03/10/1999
Form PC20IR1I			03/10/1999
Form PC30CC5I			03/10/1999
Form PC30CCT2I			03/10/1999
Form PC30CCT3I			03/10/1999
Form PC31CCA1I			03/10/1999
Form PC31CCA3I			03/10/1999
Form PC31CCA5I			03/10/1999
Form PC40NR1I			03/10/1999
Form PC40NR2I			03/10/1999
Form PC40NR6I			03/10/1999
Form PC40NRCA1I			03/10/1999
Form PC40NRCA2I			03/10/1999
Form PC40MCR1I			03/10/1999
Form PC40MCR2I			03/10/1999
Form PC60NR1I			03/10/1999
Form PC60NR4I			03/10/1999
Form PC60MCR1I			03/10/1999



**ARKANSAS  
Group Health**

<b>SEPARATE ACCOUNT INVESTMENT OPTION FOR EMPLOYER RETIREE HEALTH PLANS- STOP LOSS INSURANCE FORM NUMBERS</b>	<b>DESCRIPTION</b>	<b>DEPT FILE NO.</b>	<b>APPROVAL DATE</b>
GPX-SEL-0001	Specific Loss Health Policy		09/20/1991
GPX-SEL-0002	Specific Loss Health Policy		09/20/1991
GPX-SEL-0003	Specific Loss Health Policy		09/20/1991
GPX-SEL-0004	Specific Loss Health Policy		09/20/1991
GPX-SEL-0005	Specific Loss Health Policy		09/20/1991
GPX-SEL-0006	Specific Loss Health Policy		09/20/1991
GPX-SEL-0007	Specific Loss Health Policy		09/20/1991
GPX-SEL-0008	Specific Loss Health Policy		09/20/1991
GPX-SEL-0009	Specific Loss Health Policy		09/20/1991
GPX-SEL-0010	Specific Loss Health Policy		09/20/1991
GPX-SEL-0011	Specific Loss Health Policy		09/20/1991
GPX-SEL-0012	Specific Loss Health Policy		09/20/1991
GPX-SEL-0013	Specific Loss Health Policy		09/20/1991
GPX-SEL-0014	Specific Loss Health Policy		09/20/1991
GPX-SEL-0015	Specific Loss Health Policy		09/20/1991
GPX-SEL-0016	Specific Loss Health Policy		09/20/1991
GPX-SEL-0017	Specific Loss Health Policy		09/20/1991
GPX-SEL-0018	Specific Loss Health Policy		09/20/1991
GPX-APP-0003	Application for Specific Loss Health Policy		09/20/1991